

CLAIMS ONLY						Application Number 10693719	Filing Date					
						Applicant(s)						
* May be used for additional claims or amendments												
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1	1					51						
2		1				52						
3						53						
4			1			54						
5		1				55						
6			1			56						
7				1		57						
8	1					58						
9		1				59						
10		1				60						
11			1			61						
12				1		62						
13	1					63						
14		1				64						
15			1			65						
16				1		66						
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43						93						
44						94						
45						95						
46						96						
47						97						
48						98						
49						99						
50						100						
Total Indep	6					Total Indep						
Total Depend	10					Total Depend						
Total Claims	16					Total Claims						